

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1-26-96-6-0335-C (9)

DOCUMENT # 521190

1. Corporation Name

COLLINS, BROWN, CALDWELL, BARKETT, ROSSWAY, GARA VAGLIA & MOORE, CHARTERED



Principal Place of Business

756 BEACHLAND BOULEVARD
P O BOX 3686
VERO BEACH FL 32964

Mailing Address

756 BEACHLAND BOULEVARD
P O BOX 3686
VERO BEACH FL 32964

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

3. Date Incorporated or Qualified: 12/29/1976
3a. Date of Last Report: 01/31/1995
4. FEI Number: 59-1795861
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes (checked) No

9. Name and Address of Current Registered Agent

COLLINS JR., GEORGE G.
744 BEACHLAND BLVD.
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 756 Beachland Boulevard
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Special Representative (agent or agent-in-fact) (Print Name)

(Initials) Registered Agent (signature provided with this filing)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1. TITLE	P/D
NAME	COLLINS, GEORGE G JR.	2. NAME	
STREET ADDRESS	756 BEACHLAND BOULEVARD	3. STREET ADDRESS	
CITY-STATE-ZIP	VERO BCH FL	4. CITY-STATE-ZIP	
TITLE	PD	5. TITLE	V/T/D
NAME	CALDWELL, WILLIAM	6. NAME	
STREET ADDRESS	756 BEACHLAND BOULEVARD	7. STREET ADDRESS	
CITY-STATE-ZIP	VERO BCH FL	8. CITY-STATE-ZIP	
TITLE	VD	9. TITLE	V/S/D
NAME	BROWN, CALVIN B	10. NAME	
STREET ADDRESS	756 BEACHLAND BOULEVARD	11. STREET ADDRESS	
CITY-STATE-ZIP	VERO BCH FL	12. CITY-STATE-ZIP	
TITLE	VD	13. TITLE	V/D
NAME	BARKETT, BRUCE D	14. NAME	
STREET ADDRESS	756 BEACHLAND BLVD	15. STREET ADDRESS	
CITY-STATE-ZIP	VERO BCH FL	16. CITY-STATE-ZIP	
TITLE	VD	17. TITLE	
NAME	ROSSWAY, BRADLEY W	18. NAME	
STREET ADDRESS	756 BEACHLAND BOULEVARD	19. STREET ADDRESS	
CITY-STATE-ZIP	VERO BEACH FL	20. CITY-STATE-ZIP	
TITLE	SD	21. TITLE	V/D
NAME	GARAVAGLIA, MICHAEL J	22. NAME	
STREET ADDRESS	756 BEACHLAND BLVD	23. STREET ADDRESS	
CITY-STATE-ZIP	VERO BCH FL	24. CITY-STATE-ZIP	

11. CHANGE	<input checked="" type="checkbox"/>	ADDITION	<input type="checkbox"/>
12. CHANGE	<input checked="" type="checkbox"/>	ADDITION	<input type="checkbox"/>
13. CHANGE	<input checked="" type="checkbox"/>	ADDITION	<input type="checkbox"/>
14. CHANGE	<input type="checkbox"/>	ADDITION	<input checked="" type="checkbox"/>
15. CHANGE	<input type="checkbox"/>	ADDITION	<input type="checkbox"/>
16. CHANGE	<input type="checkbox"/>	ADDITION	<input type="checkbox"/>
17. CHANGE	<input checked="" type="checkbox"/>	ADDITION	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/96 (407) 231-4343
Date Date of Filing

CR2E034 (12/95)